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FROM Thomas M. Isaacson

DATE 2004-12-01 23:32:46 GMT

RE Application No.:10/003,092

### COVER MESSAGE

Attorney Docket: 2000-0600D

Dear Sirs:

Please find attached an IDS in the above-referenced case.

Respectfully submitted,

The Law Office of Thomas M. Isaacson  
(410) 414-3056

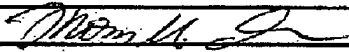
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PTO/SB/21 (08-03)

Approved for use through 08/30/2003. OMB 0651-0031.  
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<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)	Application Number	10/003,092	
	Filing Date	November 2, 2001	
	First Named Inventor	Joern Ostermann et al.	
	Art Unit	2841	
	Examiner Name	Unknown	
Total Number of Pages in This Submission	5	Attorney Docket Number	2000-06000

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual name	Thomas M. Isaacson, Reg. No. 44166	
Signature		
Date	December 1, 2004	

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